

SEP 20 2005

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission: 7

Application Number	10/039,062
Filing Date	December 31, 2001
First Named Inventor	William R. Matz
Art Unit	2153
Examiner Name	Sean M. Reilly
Attorney Docket Number	BS01376

ENCLOSURES

(Check all that apply)

☒ Fee Transmittal Form☒ Fee Attached☐ Amendment/Reply☐ After Final☐ Affidavits/declaration(s)☐ Extension of Time Request☐ Express Abandonment Request☒ Information Disclosure Statement☐ Certified Copy of Priority Document(s)☐ Response to Missing Parts/Incomplete Application☐ Response to Missing Parts under 37 CFR 1.52 or 1.53☐ Drawing(s)☐ Licensing-related Papers☐ Petition☐ Petition to Convert to a Provisional Application☐ Power of Attorney, Revocation
Change of correspondence Address☐ Terminal Disclaimer☐ Request for Refund☐ CD, Number of CD(s)☐ After Allowance Communication to Group☐ Appeal Communication to Board of Appeals
and Interferences☐ Appeal Communication to Group
(Appeal Notice, Brief, Reply Brief)☐ Proprietary Information☐ Status Letter☐ Other Enclosure(s) (please identify below):

Remarks:

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Name (Print/Type)	Bambi Faivre Walters	Reg. No.:	45,197
Signature	<i>Bambi Faivre Walters</i>		
Date	9/16/05		

CERTIFICATE OF TRANSMISSION / MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Name (Print/Type)	Maureen M. Pettine	Date	09/20/2005
Signature	<i>Maureen M. Pettine</i>		

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p. 2

SEP 20 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: William R. Matz Group Art Unit: 2153
Application No.: 10/039,062 Examiner: Sean M. Reilly
Filed: December 31, 2001
Title: "System and Method for Targeted Content Distribution Using Tagged Data Streams"

VIA FACSIMILE 571-273-8300

Attn: Examiner Unassigned

37 C.F.R. § 1.8 CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on: 09/20/2005 (date of transmission).

Maureen M. Pettine
Name of Person Faxing This Paper

Maureen M. Pettine
Signature
September 20, 2005
Date of Transmission

INFORMATION DISCLOSURE STATEMENT

Pursuant to 37 CFR §§1.56, 1.97, and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached Forms PTO 1449 (pp. 1-5).

This Information Disclosure Statement is being submitted after the mailing of a first Office Action in this application and therefore, a certification fee is believed to be required (37 CFR § 1.97(b)(3)).

09/21/2005 MBINAS 00000032 10039062

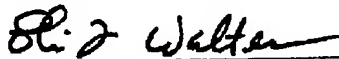
01 FC:1806

180.00 OP

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It is respectfully requested that the references listed on the attached forms be expressly considered by the Examiner and be made of record in the application and appear among the "References Cited" on any patent to issue therefrom.

Respectfully submitted,



Bambi F. Walters
Attorney for Applicants
Registration No. 45,197
P. O. Box 5743
Williamsburg, VA 23188
Telephone: 757.253.5729

Date: 9/16/05

FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

Application Number 10/039,062

Filing Date December 31, 2001

First Named Inventor William R. Matz

Examiner Name Sean M. Reilly

Art Unit 2153

Attorney Docket No. BS01376

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SEP 20 2005

TOTAL AMOUNT OF PAYMENT

\$180.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other

☐ Deposit Account

Deposit Account No. 19-2167

Deposit Account Name:

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☐ Charge fee(s) indicated below, except for the filing fee

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES			SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)		
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150	500	250	600	300		
Provisional	200	100	0	0	0	0		

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =		x	=

Fee (\$)	Small Entity Fee (\$)
50	25
200	100
360	180
Multiple Dependent Claims	
Fee (\$)	Fee Paid (\$)

HP=highest number of independent claims paid for, if greater than 3.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 or HP =		x	=

HP=highest number of independent claims paid for, if greater than 3

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$25 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50	(round up) x	=

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge):

Supplemental IDS

\$180.00

SUBMITTED BY:

Name (Print/Type) Bambl F. Walters

Registration No.
(Attorney/Agent)

45,197

Complete (if applicable)

Telephone:

(757) 253-5729

Signature

B. F. Walters

Date

9/16/05

FEE TRANSMITTAL for FY 2005

☐ Applicant claims small entity status. See 37 CFR 1.27

Application Number	10/039,062	RECEIVED CENTRAL FAX CENTER SEP 20 2005
Filing Date	December 31, 2001	
First Named Inventor	William R. Matz	
Examiner Name	Sean M. Reilly	
Art Unit	2153	
Attorney Docket No.	BS01376	

TOTAL AMOUNT OF PAYMENT **\$180.00**
METHOD OF PAYMENT (check all that apply)
☐ Check ☒ Credit Card ☐ Money Order ☐ None ☐ Other
☐ Deposit Account Deposit Account No. 19-2167

Deposit Account Name:

The Director is authorized to: (check all that apply)
☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

FEE CALCULATION
1. BASIC FILING, SEARCH, AND EXAMINATION FEES

FILING FEES				SEARCH FEES		EXAMINATION FEES	
Application Type	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	—
Design	200	100	100	50	130	65	—
Plant	200	100	300	150	160	80	—
Reissue	300	150	500	250	600	300	—
Provisional	200	100	0	0	0	0	—

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>
— - 20 or HP =	—	x — =
		<u>Fee Paid (\$)</u>
		—

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<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
— - 100 =	— / 50	— (round up) x	— =

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Supplemental IDS**\$180.00**
SUBMITTED BY:

Name (Print/Type)	Registration No. (Attorney/Agent)	Complete (if applicable)
Bambi F. Walters	45,197	Telephone: (757) 253-5729
Signature <i>B.F. Walters</i>	Date <i>9/16/05</i>	

PTO/SB/08A (08-00)

Approved for use through 10/31/2002. OMB 0851-0031
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Complete If Known

Application Number	10/039,062
Filing Date	December 31, 2001
First Named Inventor	William R. Matz
Group Art Unit	2153
Examiner Name	Sean M. Reilly
Attorney Docket Number	BS01376

Sheet	1	of	1
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[illegible]

Date Considered

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. **DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.**

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